

**2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# S86330

**FILED**  
**Jun 28, 2005**  
**Secretary of State****Entity Name:** ENDLESS SUMMER VACATIONS USA, LTD., CORP.**Current Principal Place of Business:**13144 PARK BLVD  
SUITE C  
SEMINOLE, FL 33776 US**New Principal Place of Business:**13799 PARK BLVD N  
PMB#291  
SEMINOLE, FL 33776 US**Current Mailing Address:**13144 PARK BLVD  
SUITE C  
SEMINOLE, FL 33776 US**New Mailing Address:**13799 PARK BLVD  
PMB #291  
SEMINOLE, FL 33776 US**FEI Number:** 59-3091808**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**WRIGHT, LESLIE N  
13144 PARK BLVD  
SUITE C  
SEMINOLE, FL 33776 US**Name and Address of New Registered Agent:**WRIGHT, N., LESLIE  
13799 PARK BLVD N  
PMB #291  
SEMINOLE, FL 33776 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: N L WRIGHT

06/28/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: WRIGHT, N. LESLIE,  
Address: 8097 140TH ST. NO.  
City-St-Zip: SEMINOLE, FL 34646

Title: VPS ( ) Delete  
Name: WRIGHT, CYNTHIA H  
Address: 8097 140TH ST. N.  
City-St-Zip: SEMINOLE, FL 34346

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PT (X) Change ( ) Addition  
Name: WRIGHT, N. LESLIE,  
Address: PMB #291/ 13799 PARK BLVD  
City-St-Zip: SEMINOLE, FL 34646

Title: VPS (X) Change ( ) Addition  
Name: WRIGHT, CYNTHIA H  
Address: PMB #291/13799 PARK BLVD N  
City-St-Zip: SEMINOLE, FL 34346

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: C WRIGHT

VP

06/28/2005

Electronic Signature of Signing Officer or Director

Date